PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

NOVCEC. OZ8C1

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | |
|--|---|---|---------------------------------------|-------------------------------------|---------------------------|-----------------------------------|-----|--------------------|------------------------|------|----------------------------|--|
| TOTAL CLAIMS | | | , 2 | | | |] | RATE | FEE | ٦ | RATE | FEE |
| F | OR . | * | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 385.00 | OR | BASIC FEE | |
| TOTAL CHARGEABLE CLAIMS | | | / 2_ minus 20= | | * | | | X\$ 9= | | OR | X\$18= | |
| INI | DEPENDENT C | LAIMS | Zminus 3 = | | * | - | · | X43= | | OR | X86= | |
| M | JLTIPLE DEPE | NDENT CLAIM P | RESENT | | | | | +145= | | OR | +290= | |
| * 11 | the difference | e in column 1 is | less than ze | ero, enter | "0" in c | column 2 | ı | TOTAL | 38-S | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | • | SMALL E | | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIO PAID F | BER JUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * | Miņus | *** | | = | | X43= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +145= | | OR | +290= | |
| | | | | | • | | L | TOTAL | | | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colum | n 2) | (Column 3) | · ^ | DDIT. FEE L | | , | ADDII. PEEI | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | | | X\$ 9= | ٠. | OR | X\$18= | |
| | Independent | * | Minus | ENDENT | CL AIM | = . | | X43= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +145= | | OR | +290= | |
| | | | | | | | | TOTAL ODIT, FEE | | OR , | TOTAL ODIT. FEE | |
| | | (Column 1) | · · · · · · · · · · · · · · · · · · · | (Colum | | (Column 3) | | | • | • | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMBI PREVIOL PAID F | ER . JSLY | PRESENT EXTRA | | | ADDI- TONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | | Minus | *** | | = | | X43= | | OR | X86= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +145= | | OR | +290= | |
| ** | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | OP L | TOTAL DDIT. FEE | |
| 1 | he "Highest Num | mber Previously Paid ber Previously Paid | For" (Total or | SPACE is Independen | less than it) is the l | i 3, enter "3." highest number | | DIT. FEE L | opriate box | | | |